

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
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14		1				
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17	1	1				
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40	1					
41		1				
42	1					
43		1				
44		1				
45	1					
46		1				
47		1				
48		1				
49		1				
50		1				
TOTAL IND.	9					
TOTAL DEP.	41					
TOTAL CLAIMS	50					

	★		★		★	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52						
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97						
98						
99						
100						
TOTAL IND.	0					
TOTAL DEP.	1					
TOTAL CLAIMS	1					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS